

DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES
DEVELOPMENTAL DISABILITIES PROGRAM



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DPHHS-DSD

March 2, 2007

TO: Larry Noonan, Executive Director, AWARE, Inc.
John O'Donnell, Chairperson, AWARE Board of Directors
Mike Schulte, AWARE, Inc
Julie Thilmony, Michelle Bishop, Megan Woods, Wallace Sutter, AWARE -
Billings

FROM: Michelle Sheedy, Quality Improvement Specialist
Developmental Disabilities Program

SUBJECT: Annual Quality Assurance Review - Billings

Attached is the Annual Quality Assurance Review for the AWARE, Inc. Billings program. The review covers the period from January 1, 2006 through January 30, 2007.

I would like to thank the direct care staff at all the program sites and the administrative staff in both the Billings and Anaconda offices for their assistance during the review and their timely responses to concerns. I enjoyed meeting staff at all the homes and day program and was favorably impressed by the services AWARE is providing in Billings. I hope the recommendations contained in the report help as you continue to improve the quality of services offered to people with disabilities.

cc: Suzn Gehring, Regional Manager, DDP
Tim Plaska, Community Services Bureau Chief, DDP
John Zeeck, Quality Assurance, DDP
Perry Jones, DDP
Ali Sturm, DDP

AWARE-BILLINGS
Quality Assurance Review
Fiscal Year 2007
3/2/07

SCOPE OF THE REVIEW:

This Quality Assurance Review covers the period from January 1, 2006 through January 30 2007. The review includes a desk review of AWARE's policies, personnel records, evacuation drills, accreditation, transportation and group home licenses, plus a review of consumer records and interviews with staff during on-site visits to all residential programs and the AWARE Day Program. Eight consumers (one from each home and one who attends day program only) were chosen at random to evaluate services.

GENERAL AREAS:

A. ADMINISTRATIVE

Significant Events from the Agency:

- **AWARE has opened a new group home in Billings**
- **AWARE has increased the number of consumers in residential and day services by nine this year**

Policies and Administrative (DDP) Directives:

The AWARE policy and procedure manual was reviewed and found to be in compliance with DDP directives. Since the last review, AWARE has updated the emergency evacuation procedure to apply to the Billings area. There are still some areas of the policy manual that need to be updated including omitting the use of MANDT (since AWARE uses HELP), and replacing references and names from the Anaconda office with local contacts.

Accreditation:

AWARE underwent CARF accreditation in the Spring of 06 and received a 3 year accreditation. There were no deficiencies noted in the CARF review for services in Billings. AWARE was commended for their new housing in Billings. The report comments that the new houses in Billings are accessible and well-constructed and offer an excellent home environment for individuals served.

Licensing:

All group homes were found to have current licenses with no deficiencies noted.

Fiscal:

DPHHS's desk review of AWARE' fiscal year 2005 audit reported that no questionable costs were found. Corporation assets and revenues both increased while expenses decreased. Two areas to address were noted as follows:

1. Cash deposits in the bank exceed the FDIC insurance for the account.
2. Increasing the defensive interval to the 3- 6 month range.

AWARE'S end of the year financial reports were receive in the regional office on 10-17-06. The amount of service provided exceeded our contract requirement for all programs of service. DDPs new rates payment system is projecting AWARE's revenue to decrease by at least 5% this year. Fiscal adjustments may be needed.

Appendix I:

There were no items negotiated in Appendix I with AWARE this year.

B. WORK/DAY/COMMUNITY EMPLOYMENT

Accomplishments:

- **AWARE's Work Program has increased the number of people placed in community jobs to 6. In addition, AWARE has crews working in auto detailing, lawn crew and snow removal crew.**
- **The wash bay area inside of the Car Detailing Shop has been completed**
- **The day/work program has consolidated staff so they are just assigned to the day program rather than part day and part residential**
- **Incident reports are coming directly from the day program rather than being routed through the residential coordinator.**

Programmatic Deficiencies/Corrections to Deficiencies:

No deficiencies were noted at the AWARE Day/Work Program.

HEALTH & SAFETY

Vehicles:

AWARE conducts regular vehicle inspections for the vehicles used to transport consumers. Staff operating the agency vehicles are licensed and trained. See additional information under transportation.

Consumers:

AWARE has met the health and safety needs of consumers served. Medical concerns and injuries were promptly handled by the AWARE day staff.

Medication Safety:(training, programs, prns, med certification, errors)

There were no medication errors reported during the past year at the AWARE Day Program. Congratulations! (QAOS #9)

Sites: (Appearance, evacuation drills, emergency backup)

The day program is always clean and well maintained. During random visits throughout the year staff ratios have been more than adequate. When safety concerns have been noted in the work area, staff have addressed them promptly. Fire drills have been done monthly. Emergency backup is readily available to staff since they are located in the same building as the administrative staff.

SERVICE PLANNING & DELIVERY

Individual Planning (Assessment, implementation, monitoring)

Individual program data was reviewed at the day program for seven of the consumers in the sample. Objectives or Actions stated in the IP/PSP were being implemented as specified in the plans with the exception of one individual in the sample. He has an objective to work a variety of jobs for 3 hours each day and this has not been met. I spoke with Julie Thilmony and requested the day program look at amending this objective.

A new data system was developed by the day program staff this year. Objective data is all collected in one spot and this made it much easier to locate needed data.

Leisure/Recreation:

Consumers in the day program are involved in a wide variety of leisure and recreation activities ranging from community outings, to music classes, to computer activities to arts and crafts activities.

Client Rights (Restrictions, grievance Procedure:

There were no issues reported involving violations of client rights during the reporting period.

Medical/Health Care:

Medical and health care needs were promptly taken care of by the day program staff as they occurred throughout the year.

Emotionally Responsible Care Giving:

During random drop-in visits to AWARE's Day Program throughout the year, staff were observed to be actively engaged with consumers in an emotionally responsible fashion.

Consumer Surveys:

Consumer surveys were completed for most of the individuals in the survey by their case managers. These were reviewed and no issues or concerns were noted with AWARE's services.

INCIDENT MANAGEMENT

APS:

There were no issues in the day program involving Adult Protective Services this year.

Incident Reporting:

Incidents have been reported in a timely manner from the Day Program. As noted in the accomplishment section, incidents are now being reported directly by the day program staff rather than being routed through residential program directors.

Critical Incident Investigations:

Critical incidents have been reported on time and investigations have been completed within the required time-frames. There were two critical incidents which occurred at the day program during the past year. Both involved use of restraints (therapeutic holds).

C. RESIDENTIAL

Accomplishments:

- Residential services have expanded to serve an additional eight individuals this year: 4 at Hyacinth, 2 at Wyoming, 1 at Edmond and 1 at Heritage.
- Hyacinth Group Home opened in October 2006.
- An individual at Bender Road with intense behavioral challenges graduated his behavior program in October 2006
- Another individual with intense behavior needs at Bender has been doing excellent compared to past residential experiences. He had one incident of aggression during the entire year and, according to staff who had worked with him in another area of the state, the aggression was mild compared to past incidents.
- Heritage group home staff have worked very hard at developing better relationships with families of consumers in their home.
- The level of aggressive behavior at Edmond group home is at its lowest point ever.

Programmatic Deficiencies/Corrections to Deficiencies:

There were no programmatic deficiencies in the AWARE residential sites.

HEALTH & SAFETY

Vehicles:

AWARE conducts regular vehicle inspections for the vehicles used to transport consumers. Staff operating the agency vehicles are licensed and trained. See additional information under the transportation section.

Consumers:

AWARE continues to meet the health and safety needs of the consumers they serve. Medical concerns are addressed promptly as are safety concerns.

AWARE program directors have given excellent backup assistance to staff at the group homes throughout the year. Staff have repeatedly stated that they are very comfortable with the amount of assistance, time spent, and emergency response they receive from program directors (QAOS 5 commendation).

Communication with involved families has caused some problems during the year at various

homes. AWARE program staff are currently trying to involve and enhance communication and this needs to continue.

Medication Safety:

AWARE has a very low rate of medication errors (QAOS #9). There were a total of five errors during the entire year and two of these were medication refusals on the part of the consumers. PRN protocols are in place for those consumers who use PRN medications. Medication books at all homes are very well organized. AWARE has copies of all medication certifications at the back of the medication books which is very helpful.

There were two instances during random visits where staff who were not medication certified were signing the MAR sheets. In one instance (QAOS #3) the staff in question was double checking on individuals who were independently taking their medications. In another instance, QAOS #2, staff administered medication and was not medication certified. AWARE took immediate action by instructing the staff to take the medication test as soon as possible and to not pass any medications until it was passed. To avoid having this happening again, the program directors have begun reviewing staff certification monthly with the group home managers. Both QAOS #2 and #3 have been adequately addressed.

Sites:

All residential sites were found to be clean and well maintained during the course of the year. During random visits to all homes, staff ratios were always met. One person is assigned to do a monthly home inspection which includes smoke detectors. These inspections are turned in to the Anaconda office. Fire extinguishers are checked by the fire marshal on a regular basis.

Evacuation Drills:

Emergency evacuation drills were done monthly in each residential site. It was impressive that staff have begun having drills during the night shift. Several were noted to occur at midnight or later (QAOS 7 commendation). AWARE has also done a good job of taking steps to make sure there are plans in place for individuals who have historically had difficulty exiting during drills. AWARE also started tornado and earthquake drills this year.

SERVICE PLANNING & DELIVERY:

Individual Planning (Assessment, Implementation & Monitoring)

Individual program books were reviewed for one person at each residential site. All programs were implemented as stated in the plan. The books are very well organized and data is easy to locate. Quarterly reports have been submitted and plans are monitored internally.

AWARE staff have transitioned into the PSP process this year. There have been some instances where direct care staff (residential and/or vocational) have not been involved in the PSP meeting. This was partly due to the fact that during the initial trainings for PSPs, participants were told that no one could be involved in the PSP who hadn't been through the training. The current PSP training that is occurring within the State has changed significantly from the initial training sessions. I think it would enhance the process if more effort was made to have staff who work day-to-day with the individuals participate in the meetings. If future PSP trainings are offered in Billings, I would also encourage more AWARE staff participate in these.

Leisure/Recreation:

Leisure and recreation activities were offered daily at the residential sites. Several of the homes have an impressive number and variety of community activities each month. Activities are based on the interests of the consumers in the homes. Staff at one home, Evergreen, did a great job of planning a surprise birthday party for one of the consumers at a location where his friends could be included. This singular event greatly increased his quality of life (QAOS 4 commendation).

Client Rights:

Client rights are respected at most of the homes. QAOS #6 notes a house rule at Hyacinth which requires beds be made and bedrooms cleaned before community outings. This is a rule which does conflict with client rights. AWARE's initial response to this QAOS was to remove the clean room rule and attach other house rules. The attached house rules were also violations of client rights. I met with the program manager for Hyacinth today (3/2/07) and we reviewed the house rules. There are no longer any rights violations in the rules. Issues which need to be addressed with individual clients will be done through the rights restriction process. Thank you for taking the time to address this. . There is also a concern with "treatment plans" being implemented without team approval. These plans have been rewritten to be more individualized toward the individuals involved. They still contain many aversive procedures, mainly the limiting of social activities based on behavior. The plans are currently being sent to team members for approval. The plans will be reviewed at least annually with the hope of reducing the use of aversives.

Medical/Health Care:

Medical and health care needs have been promptly dealt with during the course of the year.

Emotionally Responsible Care Giving:

During random drop-in visits and during the review, staff were seen to interact with consumers in an emotionally responsible manner. I observed positive interactions between staff and consumers at all sites.

Consumer Surveys:

Consumer surveys were completed by case management for most of the individuals chosen for this review. There were no issues or concerns on the part of consumers in these surveys.

STAFFING

Screening/Hiring:

Personnel records were reviewed for five staff and all were found to have documentation of orientation training. y at the AWARE Anaconda office was contacted and assisted in reviewing personnel files for criminal background checks. All five staff were found to have background checks completed before the start of employment with AWARE.

Orientation/Training:

All staff interviewed during the review stated they received training before starting work with consumers. Training includes blood borne pathogens, fire safety, and a complete orientation and training book. Staff are assigned to homes with the opportunity train a minimum of sixteen hours with the manager or senior staff before being assigned on their own to the home. All homes have "home-specific" training in place.

Ratios:

Staff to client ratios were checked at least quarterly throughout the year at both peak and non-peak times. Ratios were always found to be adequate.

Staff Surveys:

Staff surveys were completed with one staff from each home. Staff surveyed had been employed with AWARE anywhere from 3 months to over 3 years. A trend was noticed last year that staff were unsure who to contact when abuse or neglect is suspected. Again this year, that trend appeared (QAOS 8). Three out of seven staff were unsure what agency to contact and were also under the belief that their supervisors need to be notified before notifying Adult Protective Services. AWARE will add APS reporting to the agenda for staff meetings to be reviewed with all staff. It is recommended that APS reporting be reviewed with all staff at least quarterly.

In all other areas of the staff survey, (client rights, behavior support plans, orientation/training, medication supervision, behavior support plans, emotionally responsible caregiving, PSP's, and incident reporting) staff were knowledgeable.

INCIDENT MANAGEMENT

APS:

There was one instance of Adult Protective Service involvement with AWARE this year. Adult Protective indicated that financial exploitation did occur. New financial practices have been implemented by AWARE Billings as a result of this incident. AWARE has conducted training for residential coordinators and program directors on consumer checking accounts and personal spending funds, consumer inventories have been updated, consumers now accompany staff when purchases are being made in their behalf and the financial policies have been updated. It is commendable that AWARE staff internally discovered this problem and reported it to Adult Protective Services immediately. They took immediate and appropriate actions toward the staff involved in the incident.

Incident Reporting:

Incidents have been reported in a timely manner throughout most of the year. During February of 2006, incidents were not being received by case management or the QIS on-line and no handwritten backup incidents were received (QAOS 1). The cause of this was a computer web-server breakdown. As a result of this, AWARE corrected the problem by sending out a notification to all staff instructing them to complete a handwritten report to send to team members. Since that time, the problem has been resolved.

The incident management committee has met weekly on a statewide basis. There is one representative from the Billings office on this committee. In some ways, it would be nice to create a local committee comprised of people, including both residential and day staff, who know the consumers and their current surroundings better.

As of January 2007, AWARE was not taking minutes of the committee meetings. This has recently been corrected and minutes were taken at the February 2 committee meeting. A system is currently being developed to allow these minutes to be separated into regions so the information is available to the regional DD office and confidentiality is maintained.

Critical Incident Investigations:

AWARE Billings residential programs had a total of eighteen critical incidents during the year. All investigations or critical incident review reports were completed within the required time frames. Of the eighteen critical incidents, twelve involved use of restraints ("therapeutic H.E.L.P. holds) and involved a small group of consumers. PSP teams have met as a result of these incidents. I recommend that positive behavior plans for these individuals continue to be re-examined to see if alternatives can be developed to be used in emergency situations to avoid the need for restraints.

D. TRANSPORTATION

Accomplishments:

- **AWARE has created winter safety kits to go in all vehicles traveling further than 20 miles**
- **AWARE staff perform daily visual checks on the vehicle and one staff has been assigned to do maintenance checks on each vehicle weekly.**

Programmatic Deficiencies/Corrections to Deficiencies:

No deficiencies were noted in AWARE's transportation services.

General:

AWARE has a drivers training program in place with a written test. Staff are checked for current drivers licenses and any vehicle stops while on or off duty must be reported to their immediate supervisor. AWARE has a vehicle driver pre-check safety list which is used daily and staff are trained on. They also complete a weekly maintenance check on all vehicles. This task is assigned to one staff who checks all of the vehicles. Repairs and general service is completed by Tireama in Billings.

AWARE would benefit from the purchase of a van with a wheelchair lift. They currently serve one individual in a wheelchair and the use of a lift would greatly decrease risk of injury to both consumer and staff. This would also expand opportunities to consumers with mobility who are interested in AWARE's services.

CONCLUSION

Findings Closed:

Overall, I was very impressed with AWARE's services in Billings. Staff are very responsive to concerns. Consumers are receiving good services in AWARE's programs. Thank you to all staff for your time and assistance in completing this review.

The following deficiencies have been responded to and addressed satisfactorily. These included submitting incident reports(QAOS 1), medication certifications, (QAOS 2 and 3) abuse and neglect reporting (QAOS 8), and client rights (QAOS 6) Thank you to AWARE staff for acting promptly in addressing these concerns as they occurred.

Findings Open/Plan of Correction:

There are no open findings or plans of correction at this time.